

SENATE BILL No. 269

DIGEST OF INTRODUCED BILL

Citations Affected: IC 5-10-8-14; IC 27-8-24.2; IC 27-13-7-19.

Synopsis: Coverage for prosthetic devices. Requires a state employee health benefit plan, a policy of accident and sickness insurance, and a health maintenance organization contract to provide prosthetic device coverage. (The introduced version of this bill was prepared by the health finance commission.)

Effective: July 1, 2008.

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January 10, 2008, read first time and referred to Committee on Health and Provider Services.

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Introduced

Second Regular Session 115th General Assembly (2008)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2007 Regular Session of the General Assembly.

SENATE BILL No. 269

A BILL FOR AN ACT to amend the Indiana Code concerning insurance.

Be it enacted by the General Assembly of the State of Indiana:

1 SECTION 1. IC 5-10-8-14 IS ADDED TO THE INDIANA CODE
2 AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY
3 1, 2008]: **Sec. 14. (a) As used in this section, "covered individual"**
4 **means an individual who is entitled to coverage under a state**
5 **employee health benefit plan.**

6 **(b) As used in this section, "prosthetic device" means an**
7 **artificial medical device that is not surgically implanted and that**
8 **is used to replace a missing limb, appendage, or other external**
9 **human body part. The term does not include the following:**

10 **(1) Artificial eyes, artificial ears, artificial fingers, artificial**
11 **toes, or dental appliances.**

12 **(2) Cosmetic devices such as artificial breasts, artificial**
13 **eyelashes, or wigs.**

14 **(3) Other devices that do not have a significant impact on the**
15 **musculoskeletal functions of the body.**

16 **(c) As used in this section, "state employee health benefit plan"**
17 **means a:**

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(1) self-insurance program established under section 7(b) of this chapter; or

(2) contract with a prepaid health care delivery plan that is entered into or renewed under section 7(c) of this chapter; to provide group health coverage.

(d) A state employee health benefit plan must provide the following:

(1) For a covered individual who is less than eighteen (18) years of age, prosthetic device coverage of at least ten thousand dollars (\$10,000) per year.

(2) For a covered individual who is at least eighteen (18) years of age, prosthetic device coverage of at least ten thousand dollars (\$10,000) during a three (3) year period.

(e) The coverage required under this section may not be subject to dollar limits, deductibles, copayments, or coinsurance provisions that are less favorable to a covered individual than the dollar limits, deductibles, copayments, or coinsurance provisions applying to other coverage generally under the state employee health benefit plan.

SECTION 2. IC 27-8-24.2 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]:

Chapter 24.2. Coverage for Prosthetic Devices

Sec. 1. As used in this chapter, "insured" means an individual who is entitled to coverage under a policy of accident and sickness insurance.

Sec. 2. (a) As used in this chapter, "policy of accident and sickness insurance" has the meaning set forth in IC 27-8-5-1.

(b) The term does not include the following:

(1) Accident only, credit, dental, vision, Medicare, Medicare supplement, long term care, or disability income insurance.

(2) Coverage issued as a supplement to liability insurance.

(3) Automobile medical payment insurance.

(4) A specified disease policy.

(5) A limited benefit health insurance policy.

(6) A short term insurance plan that:

(A) may not be renewed; and

(B) has a duration of not more than six (6) months.

(7) A policy that provides a stipulated daily, weekly, or monthly payment to an insured during hospital confinement, without regard to the actual expense of the confinement.

(8) Worker's compensation or similar insurance.

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(9) A student health insurance policy.

Sec. 3. (a) As used in this chapter, "prosthetic device" means an artificial medical device that is not surgically implanted and that is used to replace a missing limb, appendage, or other external human body part.

(b) The term does not include the following:

(1) Artificial eyes, artificial ears, artificial fingers, artificial toes, or dental appliances.

(2) Cosmetic devices such as artificial breasts, artificial eyelashes, or wigs.

(3) Other devices that do not have a significant impact on the musculoskeletal functions of the body.

Sec. 4. A policy of accident and sickness insurance must provide the following:

(1) For an insured who is less than eighteen (18) years of age, prosthetic device coverage of at least ten thousand dollars (\$10,000) per year.

(2) For an insured who is at least eighteen (18) years of age, prosthetic device coverage of at least ten thousand dollars (\$10,000) during a three (3) year period.

Sec. 5. The coverage that must be provided under this chapter may not be subject to dollar limits, coinsurance, or deductibles that are less favorable to an insured than the dollar limits, coinsurance, or deductibles that apply to other coverage under the policy of accident and sickness insurance.

SECTION 3. IC 27-13-7-19 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: **Sec. 19. (a)** As used in this section, "prosthetic device" means an artificial medical device that is not surgically implanted and that is used to replace a missing limb, appendage, or other external human body part.

(b) The term does not include the following:

(1) Artificial eyes, artificial ears, artificial fingers, artificial toes, or dental appliances.

(2) Cosmetic devices such as artificial breasts, artificial eyelashes, or wigs.

(3) Other devices that do not have a significant impact on the musculoskeletal functions of the body.

(c) An individual contract or a group contract must provide the following:

(1) For an enrollee who is less than eighteen (18) years of age, prosthetic device coverage of at least ten thousand dollars

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1 (\$10,000) per year.

2 (2) For an enrollee who is at least eighteen (18) years of age,
3 prosthetic device coverage of at least ten thousand dollars
4 (\$10,000) during a three (3) year period.

5 (d) The coverage that must be provided under this section may
6 not be subject to dollar limits, copayments, or deductibles that are
7 less favorable to an enrollee than the dollar limits, copayments, or
8 deductibles that apply to other coverage under the individual
9 contract or group contract.

10 SECTION 4. [EFFECTIVE JULY 1, 2008] (a) IC 5-10-8-14, as
11 added by this act, applies to a state employee health benefit plan
12 that is established, entered into, delivered, amended, or renewed
13 after June 30, 2008.

14 (b) IC 27-8-24.2, as added by this act, applies to a policy of
15 accident and sickness insurance that is issued, delivered, amended,
16 or renewed after June 30, 2008.

17 (c) IC 27-13-7-19, as added by this act, applies to an individual
18 contract or a group contract that is entered into, delivered,
19 amended, or renewed after June 30, 2008.

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